

Taxpayer	Please provide your comments on the new Employment Service definitions and rates.
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Revising rate structure for above services to move from per diem rates to fifteen minute unit rates - how exactly does giving the agency provider less money serve the best interest of the person supported? What you are doing is going to force some of the smaller agencies to close while the larger ones struggle. They are already short staffed state-wide. This will further reduce employee wages across the board to the point where nobody wants to work in this field. What will you do then, return to developmental centers or just put everyone in nursing homes? These agencies should be getting more money to provide services, not less! How unethical and immoral can one be?

Thank you for sharing your concerns. The conversion of rates from a per diem payment to 15 minute unit increments was requested by agency providers who deliver these services. The intent of these changes is not to save money or to give providers less money. TennCare and DIDD believe the change from a per diem rate to a 15 minute unit rate to be a positive change for all providers, including smaller agencies. Currently, if a provider of Employment and Day Services provides less than a six-hour day, in many cases they cannot bill and therefore do not get paid for any portion of the services. The change to the 15 minute unit rate will allow providers the flexibility to bill for the services they deliver and at the schedule requested by the person receiving the services. Far from returning people to developmental centers or nursing home placement, the proposed changes are specifically designed to ensure that persons supported have every opportunity to fully participate in community life and that services are delivered in a way that aligns with the federal HCBS Settings Rule.

Separate and apart from these changes, please note that significant new funding was approved by the General Assembly to support wage increases for direct support professionals providing these and other waiver services beginning July 1, 2018. See <http://tndidd.tumblr.com/post/173360020625/2018-appropriations-act-state-services-budget-fy>.

Family Member/Representative	Please Provide your comments on the new Day Services definitions and rates.
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In section 8 above: " increases in utilization of Community-Based Day Services, which will now have a new service title ("Community Participation Supports") and a distinct service definition." I have had concern that because the new Federal Laws are removing Facility based programs, that will prevent my daughter from spending time with her peers in a therapeutic recreational setting like she has now. My daughter requires total care for all of her physical needs due to severe cerebral palsy. She cannot work in any capacity, yet she enjoys time in a setting where she can both get out into the community (restaurants, parks, etc.) but also spend time indoors doing activities with her peers. Having her base at "home" eliminates her ability to socialize with her peers in this way. This is truly her only real joy in her day. She is 29, non-verbal, incontinent, needs to be fed, immobile and cannot navigate her own wheelchair. She does not, however, need to be in a full time nursing facility. She is bright and social. Please take into consideration those who cannot now, or ever hold a job, yet still need facility based care.

Thank you for sharing your concern. While using the home as a base is an *option* under these proposed changes, it is not required. Facility-Based Day Supports continue to be available in each of the three 1915(c) waivers. Tennessee, like all states, has an obligation to ensure that we are providing services in the most integrated setting appropriate and in accordance with the federal HCBS settings rule. TennCare and DIDD believe in the ability of the people we serve to participate in competitive, integrated employment, regardless of their disabilities. We believe that every person has gifts and abilities that are needed by businesses in our local communities and that working together, we can help each person find their own unique path that will allow them to work at a job they enjoy and earn money that allows them to exercise greater freedom in other aspects of life. While Facility-Based Support services will continue to be available, we hope that these changes will help to ensure that your daughter and others served in these programs have every opportunity to work and to participate fully in community life.

HCBS Provider

Please provide your comments on the new Day Services definitions and rates.

You continue to want all these changes but fail to realize providers do NOT get paid a rate high enough to pay staff a living wage, thus we have a staffing crisis. If you would simply ease up with QA monitoring and trust providers there would be no need for continuing to make changes!!!! DIDD will continue to be weak until us providers can pay quality staff what they deserve. This is the bottom line. Once again wasting time instead of focusing on what needs to happen. These changes will no [sic] nothing to help truly with a persons [sic] quality of life...It may look good on paper and provide more ways for recoupsments during audits, but in reality, its [sic] a waste of time. Break down the rates...would you take care of another person for 3 hours based on what a provider can bill for basic day services???? I bet not.

Sincerely, A provider for over 15 years who is tired of seeing families and individuals go without quality staff.

Thank you for sharing this concern. It is important to understand that **many rates of reimbursement will be increased** as part of these changes. Reimbursement rates have been increased for Supported Employment-Individual Job Coaching to ensure providers are fairly compensated for the cost of providing service in a high quality way. New proposed reimbursement rates for Supportive Employment Individual Job Coaching range from \$20 to \$26 an hour. New services have been added (i.e., Exploration, Discovery, and Job Development) that will compensate providers for supports designed to assist people in learning and successfully engaging in services that can help them to be both more physically and financially independent. There is a new Quality incentive payment up to \$4,000 a year for supported employment providers supporting individuals working in competitive integrated employment at least 15 hours per week. The new Intermittent

Employment & Community Wraparound service will allow providers to bill for services that are not currently billable.

There would be no reduction to current funding levels for employment and day services as a whole. The flexible mix of services that can be provided in any given day gives providers more flexibility and ability to get paid for actual services delivered.

The newly proposed Employment and Day services have been created to support people in becoming more integrated in the community and assist them further with obtaining competitive integrated employment. Further integration in the community and obtaining and maintaining competitive integrated employment have been proven through years of research to be extremely beneficial in improving quality of life.

TennCare and DIDD believe these changes will not only truly help improve a person's quality of life but will also be beneficial to the provider community. The proposed changes to the new Employment and Day services are targeted to create more flexibility for people receiving the services and to providers delivering the services. Waiver participants will now be able to use their home as their base from which to access community and employment opportunities. Also, there will no longer be an expectation that a person receives a full six hours of Employment and Day Services on a particular day in order for the provider to bill for services the person receives.

Separate and apart from these changes, please note that *significant* new funding was approved by the General Assembly to support wage increases for direct support professionals providing these and other waiver services beginning July 1, 2018. See <http://tndidd.tumblr.com/post/173360020625/2018-appropriations-act-state-services-budget-fy>.

HCBS Provider

Please provide your comments on the new Day Service Definitions and rate.

For the changes of IN Home Day services, removal of the retirement category is not promoting person centered individualized choices. Although it is understood that some flexibility will be allowed on days that person engage in community outings, not having the ability to chose [sic] to spend the majority of any given day in their homes is not an advancement for these persons. Persons should continue to be able to live a retired lifestyle and the agency be able to bill for services. There are person's [sic] who are elderly and retire but will not meet the definition of significant medical or psychiatric issues that prevent them from community based activities. Clearly since they are retired the no longer wish to work. So this again results in lack of true person centered choices for persons to be able to have days or period of times in their homes engaging in chosen leisure activities as outlined in their plans. Creating barriers to an agency ability to bill for these specific persons will more than likely result in the person's wishes being overridden by the agency need to bill for the 60 hours per 2 weeks of day services. I agree that a retired person can and should still be meaningfully engaged in their communities. But the issue raised her [sic] is regarding the fact that many persons

we support who are retired continue to chose [sic] more time In their homes on most days than in community settings. We do not wish to force a significant lifestyle change on these persons at this stage of their lives. Many people we support have worked jobs previously or been very active in their community but upon retirement again chose to live a more leisurely lifestyle at home to a level that agencies supporting this choice, under the proposed changes for In home services, will experience a decrease in funding for supporting these persons. (Exact same comment in CAC and SW waivers)

Thank you for sharing this perspective. We agree that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. Over the course of several years we have continued to observe an alarming increase in the use of In-Home Day Services. However, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, it would then be the provider’s responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis.

HCBS Provider

Please provide your comments on the new employment Service definitions and rates.

We have four individuals working in comp. employment in the community. They are picked up from their homes and transported to their worksite by their job coach each day and then transported home at the end of each work day. Will it be possible to bill employment for the transportation to and from the worksite? We do not have public transportation and this is the only means for each person to maintain employment.

Thank you for your question. As provided in the proposed Supported Employment – Individual Employment Support (SE-IES) service definition, “Transportation of the individual to and from these services is [emphasis added] included in the rates paid for these services when such transportation is needed by a participant. Time spent transporting the individual to/from the job site, when needed, in individual job coaching is considered authorized service time and it is expected that the job coach will use this time with the individual to engage in conversation to identify/address employment-related issues and questions, and to provide support, guidance and positive reinforcement that contributes to the individual maintaining competitive integrated employment.” This form of job coaching is taught and covered in job coaching training such as Training Resource Network (TRN).

HCBS Provider

Please provide your comments on the new Day Services definitions and rates.

There needs to be an exception for individuals of retirement age and/or persons with physical or behavioral concerns that limits them from participating in the community as required. We are serving an aging population and persons with complex medical, behavioral and physical needs that prevents them from safely entering the community. Such persons should have the opportunity to receive services at home where it is the most safe environment for them. I understand there is an option for Residential Special Needs Adjustment but it is limited to 90 calendar days and this does not meet the needs for persons with complex physical, medical and behavioral concerns. The current In Home Day Service is the best option for those persons and should continue.

Thank you for sharing this concern. The Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days. As noted above, with respect to other individuals, including those of retirement age, we have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. The proposed changes are designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. If the person receives residential services, it would then be the provider’s responsibility to determine the amount of support the person needs during the hours they

are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis. All services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported, and in a manner which assures health and safety, which includes recognition that safety without the proper balance of self-determination risk can have significant unintended negative consequences, including social isolation and limitations on freedom and opportunities for relationships and experiences which are key to quality of life in the community.

Advocacy Organization

Please provide your comments on the new Day Services definitions and rates.

Special Needs Adjustment – Residential (page 9):

In general, the Council recommends that each of the criteria for keeping a person out of the community (i.e. in the home) should be subject to regular review and to external review to ensure no person is subject to isolation unnecessarily. Additionally:

2. Engaging in integrated community participation and/or integrated community employment outside the home is not possible for the individual due to needs related to a sustained behavioral crisis, involving behaviors not otherwise typical for the individual. These behaviors are not considered safe and/or would be sufficiently disruptive if displayed in the community and/or at a place of employment so as to cause issues that would interfere with successful participation in the community and or in community employment.

The Council recommends that if this reason is used, then the person shall be receiving some sort of behavior support (other than just medication) with a Behavior Service Plan in place that addresses the behavioral issues listed as reasons for staying at home and not entering the community. The BSP should have a goal of moving toward a lifestyle that can allow for community integration and activities the person wants to pursue.

3. Engaging in integrated community participation and/or integrated community employment outside the home is not possible for the individual due to needs related to recovery after a period of hospitalization (e.g. discharge after surgery), recovery due to being admitted to hospital ICU, emergency illness, surgical complication or accident.

The Council recommends that if this reason is used, then the recovery period should be regularly monitored to ensure the person is able to re-join community activities upon recovery.

In general, the Council wants to commend DIDD and TennCare for making bold changes to the programs that increase opportunities for employment and community participation and increases

consistency across LTSS programs. Specifically, we support moving to a more flexible, person-centered billing system for day services moving from 6 hours to 15 min increments. Finally, we applaud the efforts to reward providers and staff for best practices in employment services.

(Exact same comment posted in all three waivers.)

Thank you for your comments and suggestions. These services will only be approved for exceptional circumstances and for as limited a period as needed. TennCare and DIDD have developed criteria that will be applied in review and approval of Residential Special Needs Adjustment-Homebound and Non-Residential Homebound Support service, including documentation requirements. With respect to sustained behavioral crisis, this includes a plan for interventions that will help to address behavior support needs and permit future opportunities for employment and community participation. With respect to recovery following hospitalization, this also includes ongoing review with a goal of community engagement as soon as possible. Your suggestions are appreciated and will be considered in final guidance.

Direct Support Staff

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**
- **Please provide your comments on the change of Independent Support Coordinator visit requirements.**
- **Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.**

I feel that the current service minimums do not adequately reflect the ever growing and complex needs of the people in the D.I.D.D. supported services. A further cut to these services will be detrimental to their Quality of Life.

Thank you for sharing this concern. As noted above, the intent of these changes is not to “cut” services, but rather to provide greater flexibility for persons served and for providers, and to align reimbursement with expectations of the federal HCBS Settings Rule. **There would be no reduction to current funding levels for employment and day services as a whole.**

The newly proposed Employment and Day services have been created to support people in becoming more integrated in the community and assist them further with obtaining competitive integrated employment. Further integration in the community and obtaining and maintaining

competitive integrated employment have been proven through years of research to be extremely beneficial in improving quality of life.

Natural Support

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**
- **Please provide your comments on the change of Independent Support Coordinator visit requirements.**
- **Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.**
- **Other Comment**

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**

Your rates are too low. Provider Agencies cannot function without money. Your new rates are basically shooting yourselves and those you serve in the foot. Provider Agencies across the board already have trouble keeping staff. This will make it worse. More money means the average Joe will skip working at Aldi's and come work for a provider agency. There is nothing person-centered about this new plan.

- **Please provide your comments on the change of Independent Support Coordinator visit requirements.**

In my experience, ISC's are a joke. What a waste of taxpayer money this is! Give the money to provider agencies who actually know the individual, because there isn't an ISC in the state that knows about the persons supported.

- **Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.**

How is this person-centered? You're putting too many rules that are too difficult for provider agencies to follow. This will, in turn, prevent the persons supported from being able to truly live out their Vision.

- **Other Comment**

I frequently have contact with my friends whom receive services from DIDD. I am convinced the people who came up with this "bright" idea have never considered the people that it will affect, rather the bottom dollar. It's all a money game and the persons served will be the ones who suffer. Will my comments have any effect? I expect not, but I cannot withhold my opinion as natural support and tax paying citizen.

Thank you for sharing your concerns. It is important to understand that **many rates of reimbursement will be increased** as part of these changes. Reimbursement rates have been increased for Supported Employment-Individual Job Coaching to ensure providers are fairly compensated for the cost of providing service in a high quality way. New proposed reimbursement rates for Supportive Employment Individual Job Coaching range from \$20 to \$26 an hour. New services have been added (i.e., Exploration, Discovery, and Job Development) that will compensate providers for supports designed to assist people in learning and successfully engaging in services that can help them to be both more physically and financially independent.. There is a new Quality incentive payment up to \$4,000 a year for supported employment providers supporting individuals working in competitive integrated employment at least 15 hours per week. The new Intermittent Employment & Community Wraparound service will allow providers to bill for services that are not currently billable. **There would be no reduction to current funding levels for employment and day services as a whole.** The flexible mix of services that can be provided in any given day gives providers more flexibility and ability to get paid for actual services delivered.

Separate and apart from these changes, please note that *significant* new funding was approved by the General Assembly to support wage increases for direct support professionals providing these and other waiver services beginning July 1, 2018. See <http://tndidd.tumblr.com/post/173360020625/2018-appropriations-act-state-services-budget-fy>.

These changes do not impact Independent Support Coordination services.

The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. The newly proposed Employment and Day services have been created to support people in becoming more integrated in the community and assist them further with obtaining competitive integrated employment. Further integration in the community and obtaining and maintaining competitive integrated employment have been proven through years of research to be extremely beneficial in improving quality of life.

HCBS Provider

Pages 95 and 96

Please Provide your comments on the new Day Services definitions and rates:

The Intermittent Employment and Community Participation Wraparound services describes the person supported receiving services in their own home when they use their home as a base for a portion of the day. More explanation is needed to indicate if Wraparound services provided in the home can be provided to more than one person supported at the same time, when two or more people who are housemates receive the same service. Or, if one housemate receives Wraparound

services in their home, and other housemates do not, can both be served by the same staff? Does Wraparound services require a 1:1 staffing to be provided in the person's home?

Thank you for your question. TennCare and DIDD certainly want to be clear regarding the requirements for the proposed services. The Employment and Community Intermittent Wrap-Around service can be provided in the home to more than one person supported at the same time when two or more people are housemates and receive the same service and need the service at the same time. Note that there are multiple levels of reimbursement which track to current staffing expectations for such levels. Only persons receiving higher levels of reimbursement are expected to require 1:1 (or greater) staffing during this time.

Family Member/Representative

Received written comment in the mail

Change plans during day, not feasible. We live in Kingston Springs. Not an option to decide to go home during the day. He has scheduled access ride at the end of the day to Bellevue.

Ability to interact with others: Our son has plenty of opportunities that we provide. He does not need a forced plan by someone that does not know him!

Our son has a stroke last year and is unsteady on his feet. He also is having issues with memory and it would not be able to work. He is small in stature which would prevent him to work in some jobs.

As far as selecting activities in the community, the options are only so many. Our son was much happier at Rochelle with his friends. The option to limit the hours is a problem because the center cannot transport him back to the center because they have others to consider. We would have to (illegible).

Our son thrived when he spend days at the Rochelle Center. Now we have to coax and argue to go "out into the community" because someone who does not understand those individuals came up with their agenda: Horrible plan! If something works, don't try and (illegible) with a plan of your making with individuals you don't understand or know.

Every time we turn around there are new plans we have to try and live with and adjust to. These plans have been disruptive! People tend to and like being with others like them and forcing them to mix or interact to please someone not involved is or can be uncomfortable.

Thank you for sharing your concerns. While using the home as a base is an *option* under these proposed changes, it is not required. Facility-Based Day Supports continue to be available in each of the three 1915(c) waivers. Tennessee, like all states, has an obligation to ensure that we are providing services in the most integrated setting appropriate and in accordance with the federal HCBS settings rule. TennCare and DIDD believe in the ability of the people we serve to participate in competitive, integrated employment, regardless of their disabilities. We believe that every person has gifts and abilities that are needed by businesses in our local communities and that working

together, we can help each person find their own unique path that will allow them to work at a job they enjoy and earn money that allows them to exercise greater freedom in other aspects of life. While Facility-Based Support services will continue to be available, we hope that these changes will help to ensure that your son and others served in these programs have every opportunity to work and to participate fully in community life.

Advocacy Organization

Pg. 39, 40,50,51,58,71,72-75,77,89,97

Please provide your comments on the new employment services definitions and rates.

Please Provide your comments on the new day services definitions and rates.

Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.

1. On pg, 39, we have concerns about the cost cap for the Statewide Waiver. While we realize this cost cap has been in place for some time, we are concerned that people may be forced into more institutional settings unnecessarily. If it is not already occurring we request that TennCare track the number of individuals that are transitioned into other programs or settings because of exceeding the cost cap, and this this data is posted publicly on the TennCare and/or DIDD website.
2. On pg. 40 of the Statewide Waiver, we noted a significant decrease in the number of participants listed between year 1 and year 2 of the waiver. We assume that is because people transition to the CAC waiver, but we simply seek confirmation and/or clarification if necessary.
3. On pg. 50 of the Statewide Waiver, we acknowledge and concur with the change in eligibility that an individual must require at least one additional service besides independent support coordination. If the services in the 1915c waivers do not meet the need of the individual, the ECF CHOICES program is an alternative.
4. On pg. 51 of the Statewide Waiver, we concur with the qualifications of the individual providing the initial evaluation provided there is enough capacity to meet demand and the individuals have some knowledge of I/DD. This comment applies to all three waivers.
5. On page 58, we are concerned that an implementation date of 10/1/2018 is too soon for providers to make the transition. We recommend an implementation date of 01/01/2019.
6. On page 71 of the statewide waiver, we have a slight concern that talking about work every day when transporting to and from the job could become annoying for the individual over time. We are also concerned that additional documentation requirements will be implemented to “prove” these conversations are occurring, which adds to the administrative burden. This comment applies to all three waivers.
7. On page 72-75, we appreciate and support the addition of exploration and discovery to the Statewide Waiver. We also agree that benefits to work should be part of these services. We are concerned, however, in absence of standardized materials about this topic, that the

information shared may not always be accurate. We recommend that DIDD and/or TennCare develop a simple synopsis of the benefits to work materials that all providers are required to use. We also have concerns that the payment strategy of these two services may be burdensome for providers, especially small ones. While we agree with the concept of paying for outcomes, many providers simply do not have enough money in the bank to pay a DSP for 30-40 hours of work without any reimbursement. We recommend that the payment strategy be revised to provide a partial payment at the halfway mark and the balance of the payment upon completion of the service, or monthly payment as the work is provided, with the final payment withheld until the final report is submitted. Lastly, we have some concern over the limits imposed in relation to how often the service may be authorized. If someone is new to employment, it is very possible that person may lose a few jobs and need to "go back to the drawing board." While it is understood that VR services should be utilized first, we do not want any artificial barriers to employment imposed by the system if it can be avoided. These comments apply across the waivers.

8. On page 73-75, we appreciate and support the addition of job development and job coaching to the Statewide Waiver. We are concerned, however, that the payment structure of these services may create financial challenges for some providers, especially the smaller ones. While we understand and agree with the idea of paying for outcomes, it should not place an undue burden on the provider. It may end up discouraging providers from even providing the services. We recommend either providing a partial payment at the half way point of the service and the balance at the completion of the service, or allowing monthly billing with the final payment being withheld until the service is completed. We also have some concerns about the limits on how often the service can be authorized. While we do understand that VR should be the primary provider of these employment services, we do not want any artificial barriers to employment created for people with I/DD. These comments apply across waivers.
9. On page 77, we agree that additional qualifications for staff providing employment services will increase the quality of the service provided. However, the additional training should be easily accessible and affordable for providers. We are also interested in what other training courses have been approved besides what is listed. These comments apply across waivers.
10. On page 89, we appreciate the addition of an intermittent employment and community integration wrap-around service that will allow for more flexibility supporting individuals to access the community. However, we are concerned that even as some additional flexibility is created, there will still be barriers to creating a truly person-centered system. First, the idea of retirement has been completely eliminated. I have many family members who are aging. They do not go out of the house every day. There are days they simply want to stay home. Individuals should not be prevented from having this option and creating a situation where providers may not be able to be paid for providing support puts them in a difficult position. We also realize the importance of not making it too easy for providers to "guide" people towards wanting to stay home because it may be easier on them. We encourage TennCare and DIDD to not sacrifice person-centered services because they fear providers will take the easy way out. There are some individuals who, because of their physical needs, would rather go out all day long a few days a week rather than a couple hours each day. The length of time it takes them to get ready to go out creates a situation where it just isn't worth it to just go out for a couple hours, but they don't want to be out all day every day. For individuals that do plan to go out for the two hours but use public transportation such as Access Ride, it is possible that their two hour outing gets cut short because Access Ride comes early. These comments apply across all waivers.

11. On page 97, we have concerns about the new Non-Residential Homebound Support Services and the Residential Homebound Support Services (that aren't technically in the waiver amendment.). First, we seek clarification on the statement, "homebound is defined as being unable to leave your home for at least 2 hours per day for a sustained period of time which is at least 5 days in a 14 day billing period." There are individuals with specific medical conditions that prevent them from being out-of-doors based upon the weather. One individual in particular has a respiratory condition with doctors orders that he cannot be out of his home when it is below 35 or above 85 degrees. This situation is a day-by-day assessment that doesn't fit within the homebound requirement or the community wrap-around services. In cases such as these, the provider won't get paid for providing supports. In addition, individuals with life long conditions such as the one mentioned above should not be required to have a doctor's authorization every 90 days. It is an unnecessary administrative burden and adds unnecessary medical costs for doctor visits. And, medical conditions aside, there are some individuals that simply do not want to go out every day. There needs to be enough flexibility to be truly person-centered while holding providers to certain standards and gently encouraging individuals to expand their horizons. These comments apply across all applicable waivers.

In summary, The Arc Tennessee staff and board support the addition of new employment related services to the DIDD 1915c waivers. We support the move away from facility-based services to community-based services as consistent with the HCBS final rule. Our overall concern is that some of the limitations create unnecessary barriers to employment and to establishing a truly person-centered system. We do understand that providers must be held accountable for the services provided and that it makes sense to pay for outcomes – just not to the point that it may reduce the quality of life for the individual supported.

Thank you for sharing your detailed questions, comments, and concerns.

1. As you note, the cost neutrality cap in the Statewide Waiver is not part of the proposed amendment. However, the proposed amendment does specify that a person enrolled in this waiver will not be disenrolled if the sole reason the cost cap would be exceeded is the change in the reimbursement methodology proposed in this amendment. DIDD and TennCare do currently track individuals that are transitioned into other programs or settings for all reasons.
2. Yes, you are correct in your assumption that the significant decrease in the number of participants listed between year 1 and 2 of the waiver is because people transitioned to the CAC waiver.
3. Thank you for your acknowledgement and agreement.
4. No changes are proposed with respect to the qualifications of individuals conducting the initial evaluation as part of this proposed amendment. Moreover, since enrollment into the Statewide and Self-Determination waivers is closed, this language applies only to persons who meet the limited criteria for enrollment into the CAC waiver.

5. TennCare and DIDD are working closely with providers to help ensure a smooth implementation of these changes once approval is received from CMS. We continue to track toward October 1, 2018 as the implementation date.

6. As provided in the proposed Supported Employment – Individual Employment Support (SE-IES) service definition, “Transportation of the individual to and from these services is included in the rates paid for these services when such transportation is needed by a participant. Time spent transporting the individual to/from the job site, when needed, in individual job coaching is considered authorized service time and it is expected that the job coach will use this time with the individual as needed [language being added for further clarification based on public comment] to engage in conversation to identify/address employment-related issues and questions, and to provide support, guidance and positive reinforcement that contributes to the individual maintaining competitive integrated employment.” This form of job coaching is taught and covered in job coaching training such as Training Resource Network (TRN). Note that the expectation is that such conversations are expected to occur *as needed* and are not required to occur each day; nor would documentation of such conversations be required as a condition of payment.

7. TennCare and DIDD are willing to engage Benefits to Work Counselors to assist in identifying materials, training, etc., that will help to ensure the accuracy of information provided. While each person’s benefits are unique, we could potentially develop some sort of standardized worksheet or “calculator” that could be used by providers, with engagement of experts on a case-by-case basis when needed. The outcome-based payment approaches align with those currently in use in Employment and Community First CHOICES. This helps to ensure that the service is completed timely and that information is delivered that will help the person supported move to the next step in the employment process. Also note that these are activities which are not reimbursable in the waivers today. This represents new payment that will be available to providers for assisting persons supported in these processes. With respect to time limitations, while we recognize that not every job will be permanent, we would generally not expect that a person would need to re-engage in activities intended to support an informed choice regarding employment or to help identify skills, interests, etc., sooner than the increments specified.

8. The outcome-based payment approaches align with those currently in use in Employment and Community First CHOICES. This helps to ensure that the service is completed timely and that information is delivered that will help the person supported move to the next step in the employment process. Also note that these are activities which are not reimbursable in the waivers today. This represents new payment that will be available to providers for assisting persons supported in these processes. With respect to time limitations, while we recognize that not every job will be permanent, it is important that the rate structure also incentivizes retention.

9. For Exploration and Job Coaching, the staff person shall have qualified as a Job Coach by either: (1) qualifying as a Job Developer as listed in 2. below; or (2) successfully completing a competency-based training course covering best practices in job coaching and consultation, pre-approved by DIDD and covering, at minimum, specific content prescribed in policy by DIDD. Example of acceptable course is: Training Resource Network, Inc. (TRN) Job Coaching and

Consulting: Design, Training and Natural Support on-line web course. These are just examples – others could be used.

For Discovery and Job Development, the staff person shall have successfully obtained one of the following to qualify as a Job Developer:

Association of People Supporting Employment (APSE) Certified Employment Support Professional (CESP) Certificate received through passing an exam; OR

ACRE Basic Employment Certificate – The Supported Employment Online Certificate Series earned through Virginia Commonwealth University; OR

ACRE Basic Employment Certificate in Community Employment with Emphasis on Customized Employment offered by Griffin-Hammis Associates; OR

ACRE Basic Employment Certificate – College of Employment Services (CES) Plus offered by University of Massachusetts Institute for Community Inclusion; OR

ACRE National Certificate of Achievement in Employment Services earned through University of Tennessee; OR

ACRE Professional Employment Certificate earned through completion of “Work Works” on-line course offered by University of Georgia Institute on Human Development and Disability.

10. The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. A person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, it would then be the provider’s responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need

for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis.

The Residential Special Needs Adjustment – Homebound is a payment, rather than a service; however, for purposes of transparency, language regarding the payment will be added to the final submitted waiver amendment for each of the applicable residential services. This special payment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days. Homebound criteria include: 1) support and medical care related to end of life; 2) a sustained behavioral crisis; 3) support needs related to hospital recovery; and 4) chronic health issues that restricts the person from leaving their home. Detailed criteria are outlined in all three proposed waiver amendments under the service specifications for Non-Residential Homebound Support Services and in the Summary of proposed changes posted on the TennCare website with the proposed amendments at:

<https://www.tn.gov/content/dam/tn/tenncare/documents/SummaryAndDescription.pdf> A person that is able to go out for two hours will be able to receive Community Participation or Employment Service and up to four hours of the Intermittent Employment and Community Integration Wrap Around Service. A person can also choose to have a combination of Facility Based, Supported Employment and Community Participation Services on a given day. The proposed changes will allow greater flexibility in terms of how people spend their day and in terms of how providers can bill for services. All services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. If a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, the provider is paid as part of the payment for Residential Services. It would then be the provider’s responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis.

Person Supported

Please provide your comments on the new day services definitions and rates.

My name is Diana. I am the highest intelligent person of inance or any other agency I've been in. I am 32 and getting where I don't want to go out everyday. Now if you were me would you want to ? Also 8 hours a Day is just ridiculous. Would you want to be out 8 hours a day? Please here me out and make some changes.

Thank you for sharing your concern; to be clear, there has never been a requirement to spend eight hours a day outside of the home. There has been a requirement to receive six hours a day of Employment and Day Services in order for a provider to bill and be paid for Employment and Day Services. However, these proposed changes will fix that. These changes will give people more choices and providers for flexibility to provide services the way people choose.

The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of each person supported.

ISC Agency

Pg. 9

Please provide your comments on the new day services definitions and rates.

Section 10, page 9: Request that retirement is added as a criterion for Residential Homebound and Non-residential homebound services so that people at retirement age can stay home if they choose and the provider will still be able to bill for a day service. Section 10, page 9: Request that the no more than 90-day authorization requirement be deleted so that these services can be requested for the entire ISP year for those that have ongoing chronic medical issues.

Thank you for sharing your recommendations. The Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must reviewed and reauthorized, as appropriate, at least every 90 days. As noted above, with respect to other individuals, including those of retirement age, we have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD's review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. The proposed changes are designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person's age or disability. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and

Community Integration Wraparound Support service if they so choose. All services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported, and in a manner which assures health and safety, which includes recognition that safety without the proper balance of self-determination risk can have significant unintended negative consequences, including social isolation and limitations on freedom and opportunities for relationships and experiences which are key to quality of life in the community.

Family Member/Representative

- **Pages: 1-170**
- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**
- **Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.**

P 1 Establishing evidence-based, time limited.....pre-employment services.....

What evidence? This document and the HCBS rule regarding employment priorities, appears to have been written by those who have NOT one minute of experience in owning and operating a private business and encountering liability.

P 2 “change from per diem rates to 15 minute unit rates.”

If the individual has limited verbal skills, how do you know if he/she wishes to go home? How do you know the DSP doesn’t want to go back to the house to Snapchat?

P 84-85 Community participation was available and DID OCCUR before the facility based programs closed. Community/Facility DID NOT and DOES NOT have to be an either/or. The day could easily include both. They did not go home to be locked in the attic. Friendships were many times formed within the facility based day. That choice (facility based socialization) has been removed.

TN DIDD FAQ This decision may harm agencies financially, based on retired individual’s health and choices:the service that is currently known as “in home day” will be impacted by the proposed waiver amendments.”retirement will no longer be one of the criteria for this homebound service.”

- Section 10, page 9: Adding retirement as a criterion for Residential Homebound and Non-residential homebound services so that people at retirement age can stay home if they choose and the provider will still be able to bill for a day service.

- Section 10, page 9: Deleting the no more than 90-day authorization requirement so that these services can be requested for the entire ISP year for those that have ongoing chronic medical issues.

P 2 & 16 The State Waiver is closed. The Choices Waiver will be wonderful for some. It is delusional to think Choices will be adequate for ALL future ID individuals.

P 16-18, 21 All the links lead to an error message requiring multiple choice suggestions, and some of those lead to another error message.

P 25 ARC does not represent ALL. The one survey I received was designed to elicit their “desired response.” I refused to complete it, and sent an explanation. Both ARC and DIDD seem to ignore the definition of IDD, or just cater to a small segment of that population.

Thank you for sharing your concerns. The proposed new services and reimbursement approach have been designed in consultation with experts who have decades of experience in promoting employment and community participation for individuals with I/DD, and are based on years of evidence-based and best practices regarding the strategies that can help people to be successful. DSPs should provide support in a manner that aligns with each person’s unique interests and goals. Training for DSPs should help them understand how to communicate with the individuals they support, including those who may communicate differently. Facility-Based Support services continue to be available in each of the three 1915(c) waivers as well as Community Participation. A person will continue to have a variety and choice of services which can include pre-employment services that lead to job placement and employment. A person does not have to receive the pre-employment or employment services to receive Facility Based, Community Participation or the Intermittent Employment and Community Integration Wrap Around Services. All these services are available to a person to meet their unique needs. Tennessee, like all states, has an obligation to ensure that we are providing services in the most integrated setting appropriate and in accordance with the federal HCBS settings rule. The Intermittent Employment and Community Integration Wrap Around Services replaces the In-Home Day service but is available for all individuals who receive either employment or community participation services. This service is designed for those of all ages; including retirement age. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community.

The Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days.

These proposed changes do not impact how people with I/DD are enrolled into HCBS programs. Nor do they impact the People Talking to People Survey process.

HCBS Provider

Pages 4-5, 8-9

Please provide your comments on the new Employment Services definitions and rates.

Pages 4-5: The rate structure for Supported Employment Individual Job Coaching is complicated and confusing. Why is there a 243 day/5832 unit per year cap on day services that providers can bill, when we must provide more services, in some cases 365 days per year? Isn't this an aspect of a false claim?

Pages 8-9: With people who are/will be 'home bound' and currently receive IHD, the proposed change is that this service will need to be approved every 90 days. Why? This will be a difficult task for both ISCs and the state government/DIDD. How do we support people with severe social anxiety in the community, especially for extended periods? Being around crowds, other people and/or unfamiliar surroundings in the community can 'trigger' negative behaviors. The new requirements for IHD will make it more difficult for people who have behavior challenges or who are retired to choose how they spend their days.

It is not clear why providers cannot continue providing jobs for people that pay minimum wage plus benefits and are in the community but the provider is the employer. These jobs are in the community.

Thank you for your questions. The current 243 day annual limit would be converted to a limit of 1,458 hours per year which is 5,832 units a year. This limit consistent with the current day service limit, funding and expectation for service delivery. This limit does allow for new flexibility to provide 60 hours of service in a 14 day period that is not restricted to typical day hours. A false claim occurs when a provider knowingly bills or allows to be billed a claim for payment for services to which they are not entitled. Providers will continue to have an obligation to ensure that they do not bill for services in excess of specified limits. The Supported Employment Job Coaching Approach is based on three acuity tiers. People will be placed in tier based on objective level of need assessment. Level 6 has the highest acuity level and therefore has the least fading expectations. Levels 1-3 has the lowest acuity level and therefore has the most fading expectations. The job coaching rate is based on time on the job and level of fading achieved. The replacement service for In-Home Day is the Intermittent Employment and Community Participation Wrap Around Services. This service will not need to be re-authorized every 90 days. It will be re-authorized annually. The Residential Special Needs Homebound Adjustment payment and the Non-Residential Homebound Support Service are new and intended to address the needs of a specific group of individuals who were receiving In-Home Day due to exceptional behavioral or medical needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community

integration for all persons supported, these services must be reviewed and, as appropriate, at least every 90 days. With respect to people who have severe social anxiety or people who have elected retirement, the most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. A person who considers themselves retired but does not meet the definition of “homebound” would be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, it would then be the provider’s responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis. Finally, the goal of employment is not just employment, but rather that people are integrated in their communities and work alongside people who do not have disabilities. Our work creates other opportunities—to build friendships and relationships which further a person’s integration in the community. When a person works for their provider, it may not allow the same degree of integration or opportunities for advancement as a job in the community from a different employer.

HCBS Provider

Please provide your comments on the new employment services definitions and rates.

Although there are elements to the changes made to the day service components of the 1915c waiver which offer greater flexibility for people served and operational efficiency for providers, the primary impact by these changes will significantly undercut the progress made in Tennessee regarding employment related services. The adjustments significantly reduce revenue to providers who concentrated on employment services for people with significant disabilities. Instead of

incentivizing providers to pursue unique and ambitious methods of job placement and job coaching, the new waiver is highly prescriptive with regard to staffing pattern requirements. These changes will undoubtedly encourage greater utilization of CB as the priority service option for people with significant disabilities. This is an unfortunate turn of events for those providers who originally took advantage of the employment inducement rates creating innovative measures to assist people in job acquisitions. The changes in the 1915c waiver were ostensibly created with an effort to further promote the success of people utilizing services, but sadly these adjustments will create fewer options and fewer successes.

Thank you for sharing your perspective. It is important to understand that **rates of reimbursement for employment services will be increased** as part of these changes. Reimbursement rates have been increased for Supported Employment-Individual Job Coaching to ensure providers are fairly compensated for the cost of providing service in a high quality way. New proposed reimbursement rates for Supportive Employment Individual Job Coaching range from \$26 to \$20 an hour. In addition, new services have been added which will compensate supports that providers have been providing and not getting reimbursement; such as the pre-employment services and the monthly stabilization and monitoring payment. Exploration, Discovery, and Job Development are the new pre-employment services that are being added that will cover the cost for supports that providers are currently providing without reimbursement. There is a new Quality incentive payment up to \$4,000 a year for supported employment providers supporting individuals working in competitive integrated employment at least 15 hours per week. The new Intermittent Employment & Community Wraparound service will allow providers to bill for services that are not currently billable. **There would be no reduction to current funding levels for employment and day services as a whole.** The flexible mix of services that can be provided in any given day gives providers more flexibility and ability to get paid for actual services delivered. We fully expect that these changes will have significant positive impact not just on the use of CB day, but more importantly, on helping achieve competitive, integrated employment.

Further integration in the community and obtaining and maintaining competitive integrated employment have been proven through years of thorough research to be extremely prominent and imperative in improving all persons' quality of life.

Separate and apart from these changes, please note that *significant* new funding was approved by the General Assembly to support wage increases for direct support professionals providing these and other waiver services beginning July 1, 2018. See <http://tndidd.tumblr.com/post/173360020625/2018-appropriations-act-state-services-budget-fy>.

HCBS Provider

- **Please provide your comments on the new Employment Services definitions and rates.**

- **Please provide your comments on the new Day Services definitions and rates.**

New Service Category: Supported Employment – Individual

- o Does this include transportation?
- o Need clarification on non-face-to-face job coaching time. Also, is there a cap on this?
- o Rate needs to be increased for the Stabilization and Monitoring. This cost does not cover the amount of time expected, which could possibly be more than anticipated in the rate structure.

- **New Service Category: Supported Employment – Small Group**

- o ISC’s need better training on cost plans to make them more fluid.
- o Need flexibility of billing. Are all of the ratios going to be included on the cost plan? If so, how does this affect the cap and other needed services?
- o Need clarification on if services can be billed under different ratios in the same day. (Example: start out as a 1:4 ratio and then a person gets sick and goes home. Can this then be billed as a 1:3 for the remainder of time?)
- o Are people employed in a small group setting eligible for the fading incentives? If one person can fade, but the other two can’t, does the one person who doesn’t need job coaching at all times have a fading rate?

- **New Service Category: Intermittent Employment and Community Participation Wraparound**

- o This does not address people who choose to stay home or want to live a retired lifestyle. ▪ These things don’t seem to qualify for a SNADJ so need to be addressed.
- o Need to look at the time requirements. Instead of 2 hours/day, can this be changed to a number of hours every 14 days to give greater flexibility and choice?
- o How does this address people who are sick and need to stay home?
- o Does this have to be in the person’s home or could it be in a friend’s home who also receives services? (By allowing this service in other’s homes, it offers greater Tennessee Community Organizations flexibility for people to go in the community with people other than their roommates.)

New Service Category: Residential Special Needs Adjustment – Homebound

- o Why does this need to be reauthorized every 90 days? Especially for end of life or chronic medical conditions. This should be an annual authorization.
- o 90 day approval does not fit with the 14 day billing period. Need to remove the 4 day stipulation. No need to justify services weekly.
- o Is this service only able to be billed in their actual home? What if they are recovering elsewhere but still being provided services? It would be helpful if this can be billed in other homes, and would align with the Person Centered philosophy of choice.
 - o Has this been defined in greater detail other than “unable to leave their home for at least 2 hours...?”
- o Is the person (or agency) penalized if someone who receives this services does go out for more than 2 hours? Does that automatically make them ineligible because they had a good day? Overall,

the definition of Homebound confuses me!

- o It states, "Can only be authorized on a day that residential services are also provided and billed." Does this mean that if a person is supported at home all day, but at 10:00 PM, they are admitted to the hospital, we cannot bill for the hours we supported the person during the day?
- o Also states, "New guidelines, criteria, and process for approving this SNA will be established." When will we see those? These should be known on the front end for comment – not an afterthought without public comment.

General Comments

- o Need a better understanding of what the system looks like so we can plan if there are issues. Specifically, how quickly will these be resolved so we can get paid?
- o Multi-day service providers need a way to know what the other agency is billing so each knows which service to bill.
- o Rate conversion to the 15 minute unit rate loses pennies on the dollar, which adds up.
 - o Need more clarification on documentation and what will be expected once the increments are in effect.
- o Service definitions are at odds with the HCBS Settings Rule and Person Centered Thinking.
- o There are lots of changes that will require authorization. What if everyone is not reauthorized by 10/1/18? Can we still bill? Implementation needs to be thoughtful.
- o Currently each MCO has its own template. Will DIDD have one template and will the provider be able to modify/use their own?
- o Should allow for provider fiscal impact reviews.
- o Who will approve the outcome template reports?
- o How will FB ratios be determined? Do people of the same level need to be grouped together? Another service definition/ratio definition that is a bit confusing.
- o Are the employment outcome average hours listed a requirement or simply to be used as a guide?
- o Who will initiate submission request to VR once Discovery is completed. Will this be the ISC?
- o Is Exploration and Discovery only going to be approved for 30 days or will it be approved for longer duration? If only for 30 days, will we be able to get an extension as very difficult to complete in a time span of 30 days
- o How will we submit information for the Tier employment payments 2x year?
- o Does Stabilization round up where if you only provide 15 minutes during 1 week, it will count as 1 hour and you will still be able to bill for the monthly rate?
- o Is the individual able to have both types of In-Home on their cost plan?
- o This should be implemented at the beginning of the Fiscal year (July, 2019) so that providers can budget accordingly.

[Thank you for your comments.](#)

[As provided in the proposed Supported Employment – Individual Employment Support \(SE-IES\) service definition, "Transportation of the individual to and from these services is included in the rates paid for these services when such transportation is needed by a participant. Time spent transporting the individual to/from the job site, when needed, in individual job coaching is](#)

considered authorized service time and it is expected that the job coach will use this time with the individual engage in conversation to identify/address employment-related issues and questions, and to provide support, guidance and positive reinforcement that contributes to the individual maintaining competitive integrated employment.” This form of job coaching is taught and covered in job coaching training such as Training Resource Network (TRN).

While there is no specific limit on the number of non-face-to-face job coaching hours, please note that job coaching is by definition supports provided to the person, supervisor or co-worker. A provider may **only** bill for *actual services provided*, and not for the hours the person works when no supports are provided. There is a cap for job coaching as it relates to the number of hours a person works.

The rate for the Monthly Stabilization and Monitoring is the same amount per hour as the highest job coaching rate of \$26.00 an hour. The Stabilization and Monitoring Service is for one hour or less per week.

Training will be provided to ISCs regarding these changes. DIDD will provide training and implementation guidance on cost plan, billing and ratio requirements for the new services. The fading incentives are for the Supported Employment – Individual Job Coaching and do not apply to the Supported Employment – Small Group Services.

The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, it would then be the provider’s responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with

providers and with individual circles in exploring potential solutions on a person-by-person basis.

The Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days. Residential Special Needs Adjustment – Homebound (RSNA – HB) is a per diem payment based on the provision of six hours of service in the residential setting when the person meets specified homebound criteria which prohibit their participation in employment and community activities. The person must need paid support during this time. Each RSNA – HB per diem payment will count as 24 units out of the 240 total units in a 14 day period. Homebound criteria include: 1) support and medical care related to end of life; 2) a sustained behavioral crisis; 3) support needs related to hospital recovery; and 4) chronic health issues that restrict the person from leaving their home. Detailed criteria are outlined in all three proposed waiver amendments under the service specifications for Non-Residential Homebound Support Services and in the *Summary* of proposed changes posted on the TennCare website with the proposed amendments at:

<https://www.tn.gov/content/dam/tn/tenncare/documents/SummaryAndDescription.pdf>. In response to public comment, these criteria will also be outlined in each of the residential service definitions for which the RSNA-HB is applicable in the final submitted amendments. A person that is able to go out for two hours will be able to receive Community Participation or Employment Service and up to four hours of the Intermittent Employment and Community Integration Wrap Around Service. A person can also choose to have a combination of Facility Based, Supported Employment and Community Participation Services on a given day. Because the RSNA – HB is an adjustment to the residential payment, residential services will need to be authorized and paid in order to bill and receive the authorized RSNA-HB payment.

Hours billed will be paid in order, based on type of service billed, up to the maximum allowable 60 hours: 1. SE-Individual; 2. SE-Small Group; 3. Community Participation Supports; 4. Intermittent Employment & Community Participation Wraparound; 5. FB Day; 6. Residential Special Needs Adjustment – Homebound (each per diem payment billed will be counted as six hours of service). Documentation will not be required for each 15-minute increment of service, but rather should specify start and end time for the service, as well as documentation of services provided during the period, etc.

DIDD has been extremely thoughtful in the development of the implementation process for these amendments. Most Cost Plans will be converted with appropriate services, and Independent Support Coordinators will have to submit new service plans only for a relatively small group of persons supported. DIDD has been reaching out to Support Coordinators to address Supported

Employment Small Group transitions and other services that need clarification for the cost plan conversion process.

The template for the pre-employment services will be the same that is used for Employment and Community First Choices Program. The ECF Choices Provider Network and all three Managed Care Organizations use the same template as will the provider network for the 1915c Waivers. DIDD Regional Office Employment Staff will approve the pre-employment templates.

Cost modeling for the proposed waiver changes was completed in 2017 to ensure cost neutrality for the ID waivers employment/day services array. Based on provider data, assumptions were made about how utilization of the various services would change if day rates were converted to 15 minute units, if Exploration, Discovery and Job Development were added outcome-based services, if In-Home Day was redefined and if rates for 15 minute units were adopted. Facility Based Ratios will be based on current level of need. People of the same level do not have to be grouped together. The hours of service for Exploration are an average 40 hours over 30 days and for Discovery it is an average 50 hours over 90 days. The Circle of Support will initiate and identify the point person to submit the request to VR once Discovery is completed, generally the ISC.

DIDD has developed a process for the payment of the Quality Incentive Payments and documentation needed based on the pay stubs of the person supported. A person determined to meet homebound criteria can only be authorized for either the Residential Special Needs Homebound Adjustment (if the person receives Supported Living, Residential Habilitation or Family Model Residential Services) or the Non-Residential Homebound Support Service (if the person does not receive residential services of any kind) on their cost plan.

TennCare and DIDD have been working with providers on these changes for many months. The provision of services starting out October 1, 2018 can be a smooth transition as an implementation protocol has been developed that will allow for services to be converted appropriately to the service plan for most persons supported.

Home Manager

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**

I think these requirements are not reachable for some individuals. What if the person supported is not physically capable of being out for long periods? People who are on disability don't have to do

anything for the money they receive! That is SO not right. They could be out!!! And should have to DO something for their money!!

Thank you for your comments. The Intermittent Employment and Community Integration Wrap Around Service is designed to address the needs of individuals who may not thrive being out for long periods of time. A person can choose to participate in the community two hours a day, four hours a day or more. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, it would then be the provider's responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis.

HCBS Provider

Pages 1-11

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**
- **Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.**

- New Service Category: Supported Employment – Individual
 - o We would like to know if this includes transportation?
- New Service Category: Residential Special Needs Adjustment – Home Bound
 - o Is an authorization every 90 days necessary? Especially if someone is on hospice or has a chronic medical condition. Seems this should be considered annually.
 - o Document states "Can only be authorized on a day that residential services are also provided and billed." What if a person is admitted to the hospital in the evening? Does this mean we cannot bill for the hours of support we provided for the person during the day?
- General Comments:
 - o Will DIDD have one template and will the provider be able to modify/use their own?

o This should be implemented at the beginning of the Fiscal year (July, 2019) so that providers can budget accordingly

Thank you for your questions.

As provided in the proposed Supported Employment – Individual Employment Support (SE-IES) service definition, “Transportation of the individual to and from these services is included in the rates paid for these services when such transportation is needed by a participant. Time spent transporting the individual to/from the job site, when needed, in individual job coaching is considered authorized service time and it is expected that the job coach will use this time with the individual to engage in conversation to identify/address employment-related issues and questions, and to provide support, guidance and positive reinforcement that contributes to the individual maintaining competitive integrated employment.” This form of job coaching is taught and covered in job coaching training such as Training Resource Network (TRN).

The Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days. The Residential Special Needs Adjustment – Homebound is an adjustment to the payment for residential services and is only available on days the Residential services are billed and paid.

The template for the pre-employment services will be the same that is used for Employment and Community First Choices Program. The ECF Choices Provider Network and all three Managed Care Organizations use the same template as will the provider network for the 1915c Waivers.

TennCare and DIDD have been working with providers on these changes for some time. The provision of services starting out October 1, 2018 can be a smooth transition as an implementation protocol has been developed that will allow for services to be converted appropriately to the service plan for most persons supported.

Also important to understand is that **many rates of reimbursement will be *increased*** as part of these changes. Reimbursement rates have been increased for Supported Employment-Individual Job Coaching to ensure providers are fairly compensated for the cost of providing service in a high quality way. New proposed reimbursement rates for Supportive Employment Individual Job Coaching range from \$20 to \$26 an hour. New services have been added (i.e., Exploration, Discovery, and Job Development) that will compensate providers for supports designed to assist people in learning and successfully engaging in services that can help them to be both more physically and financially independent.. There is a new Quality incentive payment up to \$4,000 a year for supported employment providers supporting individuals working in competitive integrated employment at least 15 hours per week. The new Intermittent Employment & Community

Wraparound service will allow providers to bill for services that are not currently billable. **There would be no reduction to current funding levels for employment and day services as a whole.** The flexible mix of services that can be provided in any given day gives providers more flexibility and ability to get paid for actual services delivered.

HCBS Provider

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**
- **Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.**

New Service Category: Supported Employment – Individual

- o Does this include transportation?
- o Need clarification on non-face-to-face job coaching time. Also, is there a cap on this?
- o Rate needs to be increased for the Stabilization and Monitoring. This cost does not cover the amount of time expected, which could possibly be more than anticipated in the rate structure.

• **New Service Category: Supported Employment – Small Group**

- o ISC’s need better training on cost plans to make them more fluid.
- o Need flexibility of billing. Are all of the ratios going to be included on the cost plan? If so, how does this affect the cap and other needed services?
- o Need clarification on if services can be billed under different ratios in the same day. (Example: start out as a 1:4 ratio and then a person gets sick and goes home. Can this then be billed as a 1:3 for the remainder of time?)
- o Are people employed in a small group setting eligible for the fading incentives? If one person can fade, but the other two can’t, does the one person who doesn’t need job coaching at all times have a fading rate?

• **New Service Category: Intermittent Employment and Community Participation Wraparound**

- o This does not address people who choose to stay home or want to live a retired lifestyle. ▪ These things don’t seem to qualify for a SNADJ so need to be addressed.
- o Need to look at the time requirements. Instead of 2 hours/day, can this be changed to a number of hours every 14 days to give greater flexibility and choice?
- o How does this address people who are sick and need to stay home?
- o Does this have to be in the person’s home or could it be in a friend’s home who also receives services? (By allowing this service in other’s homes, it offers greater Tennessee Community

Organizations flexibility for people to go in the community with people other than their roommates.)

New Service Category: Residential Special Needs Adjustment – Homebound

- o Why does this need to be reauthorized every 90 days? Especially for end of life or chronic medical conditions. This should be an annual authorization.
- o 90 day approval does not fit with the 14 day billing period. Need to remove the 4 day stipulation. No need to justify services weekly.
- o Is this service only able to be billed in their actual home? What if they are recovering elsewhere but still being provided services? It would be helpful if this can be billed in other homes, and would align with the Person Centered philosophy of choice.
- o Has this been defined in greater detail other than “unable to leave their home for at least 2 hours...?”
- o Is the person (or agency) penalized if someone who receives this services does go out for more than 2 hours? Does that automatically make them ineligible because they had a good day? Overall, the definition of Homebound confuses me!
- o It states, “Can only be authorized on a day that residential services are also provided and billed.” Does this mean that if a person is supported at home all day, but at 10:00 PM, they are admitted to the hospital, we cannot bill for the hours we supported the person during the day?
- o Also states, “New guidelines, criteria, and process for approving this SNA will be established.” When will we see those? These should be known on the front end for comment – not an afterthought without public comment.

The 14 day billing period is excellent. The flexibility for the 6 hour day is excellent.

General Comments

- o Need a better understanding of what the system looks like so we can plan if there are issues. Specifically, how quickly will these be resolved so we can get paid?
- o Multi-day service providers need a way to know what the other agency is billing so each knows which service to bill.
- o Rate conversion to the 15 minute unit rate loses pennies on the dollar, which adds up.
 - o Need more clarification on documentation and what will be expected once the increments are in effect.
- o Service definitions are at odds with the HCBS Settings Rule and Person Centered Thinking.
- o There are lots of changes that will require authorization. What if everyone is not reauthorized by 10/1/18? Can we still bill? Implementation needs to be thoughtful.
- o Currently each MCO has its own template. Will DIDD have one template and will the provider be able to modify/use their own?

- o Should allow for provider fiscal impact reviews.

- o Who will approve the outcome template reports?
- o How will FB ratios be determined? Do people of the same level need to be grouped together?
Another service definition/ratio definition that is a bit confusing.
- o Are the employment outcome average hours listed a requirement or simply to be used as a guide?
- o Who will initiate submission request to VR once Discovery is completed. Will this be the ISC?
- o Is Exploration and Discovery only going to be approved for 30 days or will it be approved for longer duration? If only for 30 days, will we be able to get an extension as very difficult to complete in a time span of 30 days
- o How will we submit information for the Tier employment payments 2x year?
- o Does Stabilization round up where if you only provide 15 minutes during 1 week, it will count as 1 hour and you will still be able to bill for the monthly rate?
- o Is the individual able to have both types of In-Home on their cost plan?
- o This should be implemented at the beginning of the Fiscal year (July, 2019) so that providers can budget accordingly.

OTHER COMMENTS TO THE PROPOSED 1915 DAY WAIVER CHANGES There are elements to the proposed changes to the day service components of the 1915c waiver that offer greater flexibility for people served and operational efficiency for providers. However the primary impact of these changes will significantly undercut the progress made in Tennessee regarding employment related services. The adjustments significantly reduce service revenue to providers who concentrated on development and provision of employment focused services for people with significant disabilities. Instead of incentivizing providers to pursue unique and ambitious methods of job placement and job coaching, the new waiver is highly prescriptive with regard to staffing pattern requirements, and particularly the fading requirement . It seems probable that these changes will rather encourage greater utilization of CB as the priority service option for people with significant disabilities. This is an unfortunate turn of events for those providers who originally took advantage of the employment inducement rates creating innovative measures to assist people in job acquisitions. The changes in the 1915c waiver were ostensibly created with an effort to further promote the success of people utilizing services, but I have concerns these adjustments will create fewer options and fewer successes. For example – the fading provision of the proposed presents significant potential disincentive to the provider to provide employment services to individuals with significant disabilities. These individuals in many if not most cases require on-going support to acquire and maintain skills necessary for continued employment. As the fading timetable indicates, as service time continues – if a provider cannot succeed in the fading prescription – the provider may be required to continue to spend additional support time at a lower reimbursement rate. It is conceivable that if the individual cannot succeed in meeting the fading timetable – the provider will be forced to incur significant losses or simply modify the service to a community based service as suggest above. I do not agree with TennCare's argument that CMS will not approve of a service that does not have staff face to face. CMS obviously approved this model previously and providers have implemented such for years - with great success.

Thank you for your comments.

As provided in the proposed Supported Employment – Individual Employment Support (SE-IES) service definition, “Transportation of the individual to and from these services is included in the rates paid for these services when such transportation is needed by a participant. Time spent transporting the individual to/from the job site, when needed, in individual job coaching is considered authorized service time and it is expected that the job coach will use this time with the individual to engage in conversation to identify/address employment-related issues and questions, and to provide support, guidance and positive reinforcement that contributes to the individual maintaining competitive integrated employment.” This form of job coaching is taught and covered in job coaching training such as Training Resource Network (TRN).

While there is no specific limit on the number of non-face-to-face job coaching hours, please note that job coaching is by definition supports provided to the person, supervisor or co-worker. A provider may only bill for actual services provided, and not for the hours the person works when no supports are provided. There is a cap for job coaching as it relates to the number of hours a person works.

The rate for the Monthly Stabilization and Monitoring is the same amount per hour as the highest job coaching rate of \$26.00 an hour. The Stabilization and Monitoring Service is for one hour or less per week.

Training will be provided to ISCs regarding these changes. DIDD will provide training and implementation guidance on cost plan, billing and ratio requirements for the new services. The fading incentives are for the Supported Employment – Individual Job Coaching and do not apply to the Supported Employment – Small Group Services.

The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow greater flexibility to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at

the appropriate level. To be clear, a person can choose to spend their entire day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, it would then be the provider's responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis.

The Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days. Residential Special Needs Adjustment – Homebound (RSNA – HB) is a per diem payment based on the provision of six hours of service in the residential setting when the person meets specified homebound criteria which prohibit their participation in employment and community activities. The person must need paid support during this time. Each RSNA – HB per diem payment will count as 24 units out of the 240 total units in a 14 day period. Homebound criteria include: 1) support and medical care related to end of life; 2) a sustained behavioral crisis; 3) support needs related to hospital recovery; and 4) chronic health issues that restricts the person from leaving their home. Detailed criteria are outlined in all three proposed waiver amendments under the service specifications for Non-Residential Homebound Support Services and in the Summary of proposed changes posted on the TennCare website with the proposed amendments at:

<https://www.tn.gov/content/dam/tn/tenncare/documents/SummaryAndDescription.pdf>. In response to public comment, these criteria will also be outlined in each of the residential service definitions for which the RSNA-HB is applicable in the final submitted amendments. A person that is able to go out for two hours will be able to receive Community Participation or Employment Service and up to four hours of the Intermittent Employment and Community Integration Wrap Around Service. A person can also choose to have a combination of Facility Based, Supported Employment and Community Participation Services on a given day. Because the RSNA – HB is an adjustment to the residential payment, residential services will need to be authorized and paid in order to bill and receive the authorized RSNA-HB payment.

Hours billed will be paid in order, based on type of service billed, up to the maximum allowable 60 hours: 1. SE-Individual; 2. SE-Small Group; 3. Community Participation Supports; 4. Intermittent Employment & Community Participation Wraparound; 5. FB Day; 6. Residential Special Needs Adjustment – Homebound (each per diem payment billed will be counted as six hours of service).

Documentation will not be required for each 15-minute increment of service, but rather should specify start and end time for the service, as well as documentation of services provided during the period, etc.

DIDD has been extremely thoughtful in the development of the implementation process. Most Cost Plans will be converted with appropriate services, and Independent Support Coordinators will have to submit new service plans only for a relatively small group of persons supported. DIDD has been reaching out to Support Coordinators to address Supported Employment Small Group transitions and other services that need clarification for the cost plan conversion process.

The template for the pre-employment services will be the same that is used for Employment and Community First Choices Program. The ECF Choices Provider Network and all three Managed Care Organizations use the same template as will the provider network for the 1915c Waivers. DIDD Regional Office Employment Staff will approve the pre-employment templates.

Cost modeling for the proposed waiver changes was completed in 2017 to ensure cost neutrality for the ID waivers employment/day services array. Based on provider data, assumptions were made about how utilization of the various services would change if day rates were converted to 15 minute units, if Exploration, Discovery and Job Development were added outcome-based services, if In-Home Day was redefined and if rates for 15 minute units were adopted. Facility Based Ratios will be based on current level of need. People of the same level do not have to be grouped together. The hours of service for Exploration are an average 40 hours over 30 days and for Discovery it is an average 50 hours over 90 days. The Circle of Support will initiate and identify the point person to submit the request to VR once Discovery is completed, generally the ISC.

DIDD has developed a process for the payment of the Quality Incentive Payments and documentation needed based on the pay stubs of the person supported. A person can only have either the Residential Special Needs Homebound Adjustment or the Non-Residential Homebound Support Service authorized on their cost plan. There is a homebound payment for people who receive residential services and a service for people who do not receive residential services. TennCare and DIDD have been working with providers on these changes for many months. The provision of services starting out October 1, 2018 can be a smooth transition as an implementation protocol has been developed that will allow for services to be converted appropriately to the service plan for most persons supported.

Family Member/ Representative	Pages 71,72,73,90,98 <ul style="list-style-type: none">Please provide your comments on the new Employment Services definitions and rates.

- **Please provide your comments on the new Day Services definitions and rates.**

Page 71 Requiring job coaches to talk about employment to and from work could become irritating to the person supported. If this is a requirement, will it have to be documented and, if so, how? This seems like excessive and intrusive documentation.

Page 72 Adding education on benefits to work is a good addition to the waiver. Standardized information should be available so that accurate information is being shared.

Page 72 and 73 It will be difficult for providers, especially of small agencies, to implement Exploration, Discovery or Job Development if they are not reimbursed until after the completion of each. Providers still have to pay DSP wages and many providers will not have enough in the bank to cover these costs. Reimbursement should be more frequent with the final payment held until the report and documentation is complete.

Page 90 The addition of Intermittent Employment and Community Integration Wrap-around support Services is positive making it possible for people to have more person-centered services. One challenge is for those who use public transportation, such as Access Ride. Access Ride may come not come when requested – late on pickup or early on return home, so that the person is out less than 2 hours as planned. Neither the individual or the provider can control this. Also, Access Ride is too expensive for a person to go out more than once a day. Retirement has been completely eliminated. As people age, they don't always want to go out. People with I/DD should have the same option to retire as do people without disabilities. Retirement should be restored as an option for aging individuals.

Page 98 Retirement should be included as an option for to be covered in homebound services. Older adults do not always want to go out and they might be encouraged to do so, so that the provider can be reimbursed.

Thank you for your comments.

As provided in the proposed Supported Employment – Individual Employment Support (SE-IES) service definition, "Transportation of the individual to and from these services is included in the rates paid for these services when such transportation is needed by a participant. Time spent transporting the individual to/from the job site, when needed, in individual job coaching is considered authorized service time and it is expected that the job coach will use this time with the individual as needed [language being added for further clarification based on public comment] to engage in conversation to identify/address employment-related issues and questions, and to provide support, guidance and positive reinforcement that contributes to the individual maintaining competitive integrated employment." This form of job coaching is taught and covered in job coaching training such as Training Resource Network (TRN). Note that the expectation is that such conversations are expected to occur *as needed* and are not required to occur each day; nor would documentation of such conversations be required as a condition of payment.

TennCare and DIDD are willing to engage Benefits to Work Counselors to assist in identifying materials, training, etc., that will help to ensure the accuracy of information provided. While each person’s benefits are unique, we could potentially develop some sort of standardized worksheet or “calculator” that could be used by providers, with engagement of experts on a case-by-case basis when needed.

New services have been added which will compensate supports that providers have been providing and not getting reimbursement; such as the pre-employment services and the monthly stabilization and monitoring payment. Exploration, Discovery, and Job Development are the new pre-employment services that are being added that will cover the cost for supports that providers are currently providing without reimbursement.

TennCare and DIDD want to ensure that waiver funding is used only for services that are actually delivered.

The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD’s review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation. If the person receives residential services, the provider is paid as part of the payment for Residential Services. It would then be the provider’s responsibility to determine the amount of support the person needs during the hours they are at home. Not everyone needs 24/7 services. Some individuals may be able to be independent for part of the day, or could be supported with enabling technology that would minimize the need for paid staff during some hours. DIDD person-centered support teams will be available to work with providers and with individual circles in exploring potential solutions on a person-by-person basis.

Family Member/Representative	Please provide your comments on the new Day Services definitions and rates.
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I am concerned that the new rate for FB clients is inadequate to cover expenses and provide quality service. I realize money is needed for those working and in community all day, but my son also deserves a person centered quality of life.

I am the mother of a 38 year old son who is profoundly mentally retarded, incontinent and non-ambulatory. He lives in a supportive living home. He attends a day service where he is very happy. He goes out in the community each week on outings he enjoys and can understand. He has made friends and socializing with many. When he first started attending the center, he was diagnosed with social isolation and that has disappeared. If the center wasn't there for him, he would be isolated in his home and no longer around those that he knows and trust. He would only be around one staff person all day long. I think the new changes are great for those individuals that can go in the community all day and work and they deserve to be able to do that, but I also think my son and those like him should also be given the opportunity to choose where they want to spend their time without a 6month limit since in the community and working is not within their abilities.

Thank you for sharing your perspective. Facility-Based Day Supports continue to be available in each of the three 1915(c) waivers. Tennessee, like all states, has an obligation to ensure that we are providing services in the most integrated setting appropriate and in accordance with the federal HCBS settings rule. TennCare DIDD believe in the ability of the people we serve to participate in competitive, integrated employment, regardless of their disabilities. We believe that every person has gifts and abilities that are needed by businesses in our local communities and that working together, we can help each person find their own unique path that will allow them to work at a job they enjoy and earn money that allows them to exercise greater freedom in other aspects of life. While Facility-Based Support services will continue to be available, we hope that these changes will help to ensure that your son and others served in these programs have every opportunity to work and to participate fully in community life.

Family Member/Representative

- **Please provide your comments on the new Employment Services definitions and rates.**
- **Please provide your comments on the new Day Services definitions and rates.**

I'm glad that our state is moving toward rewarding providers and direct support staff for using best practices in employment services.

I am delighted to the move toward a more flexible and person-centered system for day services, using the 15-minute increments rather than a 6-hour day. (Most of us, if we're not working, do not spend a full 6 hours out of our homes every day. Individuals on waivers shouldn't have to, so this is much more reflective of real life.)

I also appreciate the move to make DIDD waiver rates and opportunities more consistent with the Employment and Community First CHOICES program.

I would suggest in the section regarding someone not being able to participate in employment or community participation due to a sustained behavioral crisis, that the person should then receive some type of behavior supports (not just medication) and that a behavior plan be created to help the person be able to participate in community activities or employment. Is there an allowance for those who are of retirement age who want to stay at home to do so? And is there an allowance for those who have a lifelong condition that might make it difficult to be out in the community to get a medical exemption that could be reviewed on a yearly basis rather than a more frequent basis?

Thank you for the positive feedback! With regard to your suggestions, the Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are designed specifically to support people with extraordinary medical or behavioral support needs which prohibit their participation in employment and community activities for limited periods. Because our expectation is that we continue to identify ways to minimize the impact of such conditions and support community integration for all persons supported, these services must be reviewed and reauthorized, as appropriate, at least every 90 days.

TennCare and DIDD have developed criteria that will be applied in review and approval of Residential Special Needs Adjustment-Homebound and Non-Residential Homebound Support service, including documentation requirements. With respect to sustained behavioral crisis, this includes a plan for interventions that will help to address behavior support needs and permit future opportunities for employment and community participation. Your suggestions are appreciated and will be considered in final guidance. As noted above, with respect to other individuals, including those of retirement age, we have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. Just because a person has chosen not to work does not mean that the person wants to stay at home all day. In fact, DIDD's review of In-Home Day Services found that most people receiving the service in fact spend part of their day in the community. The proposed changes are designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person's age or disability. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. All services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported, and in a manner which assures health and safety, which includes recognition that safety without the proper balance of self-determination risk can have significant unintended negative consequences, including social isolation and limitations on freedom and opportunities for relationships and experiences which are key to quality of life in the community.

Advocacy Organization	identified in the text of comments
	<p>These comments apply to the amendments proposed for all three of the DIDD waivers. We appreciate the provision of a rationale and summary of changes provided in the document labeled May 13, 2018. In regard to the stated reasons for making changes;</p> <p>We support the goal (#1) of increasing opportunities for employment and community participation, particularly by the following, all of which all offer some promise for some individuals on the waiver:</p> <ul style="list-style-type: none"> • creating more flexibility (3) to individual services • establishing “distinct day and employment services” (5) • adding pre-employment services (8) , and • eliminating the 6-hour requirement to bill employment or day services on a particular day (7). <p>Unfortunately, for many others, the proposed waiver amendments will likely be unworkable and will create barriers to person-centered lives. As acknowledged in the proposed amendments for all three waivers, the current enrollees are the only ones who have access to these services. The history of enrollment in the DIDD waivers has created waiver populations that are skewed toward those people of older ages who have more significant disabilities. This is distinct from the population of ECF Choices which skews towards those who are much younger and includes many individuals who have recently transitioned from special education services. While many of the proposed waiver amendments reflect the supports, services, and employment goals of ECF Choices, they do not take into account the very different needs of an older population with a different set of life experiences. Supporting individuals to have meaningful lives and real relationships and incentivizing providers to support that are laudable goals. Imposing bureaucratic goals and priorities that conflict with individual choice and experience are not.</p> <p>Page 39 – RE: Cost Caps: This section of the proposed waivers reinforces the aforementioned concern. It is unlikely that an individual currently on one of the DIDD waivers whose “health and welfare cannot be assured in the waiver” could be served by the home- and community-based services in either the more cost-limited Managed Long-Term Services and Supports Program or Employment and Community First CHOICES. Rather, increased utilization of institutional services is the more likely outcome.</p> <p>There is reason for concern that the design of the amendments, while well intentioned, will have the effect of forcing many individuals out of the waivers and into institutional services or will place increasing burdens on aging caregivers. The advocacy community’s experience over the last twenty years supports the concern that there will be new pressure on the General Assembly to lift the statutory cap on private ICFs. This is antithetical to Federal and State policies supporting community.</p> <p>Additionally, these expressed concerns are supported by the statement provided in the Waiver Changes Summary which indicates that the “vast majority of waiver funding should go to the provision of supported employment services...” We concur that supported employment is important for many people with disabilities. However, the needs of those who cannot or do not</p>

want to participate in supported employment do not appear to be valued or respected, and those individuals may be squeezed out of services altogether.

Pages 88-90 – RE: “Intermittent Employment and Community Participation Wraparound Service:” The service package does not offer flexibility for individuals to be at home and to limit their out-of-home activities, if they choose. This is most striking for those of retirement age. Retirement does not appear to be a real choice in the new design, in part because the service scope, duration, frequency and rates will not support it. Providers will not be able to support Individuals who choose to stay at home and engage in meaningful activities in their own homes. This service needs to be redesigned to prevent discriminating against those who qualify for services and supports, but whose circumstances, needs, and choices are different.

Page 97-99 – RE: Non-Residential Homebound Support Service: This type of service is an important one for those who experience a variety of challenges, including those people who have health and behavioral challenges. The term “Homebound,” however, is not an appropriate one. It is an antiquated term. People are not “bound to their homes” any more than they are “bound to their wheelchairs”. The eligibility criteria are very tightly drawn, too much so. For example, there are individuals who may need in-home supports based on behaviors that are not “atypical,” but which do create safety issues. Likewise, an individual may have a chronic health issue that makes it exhausting or unpleasant to leave their home but may not necessarily rise to an arbitrary level of “further compromising the individual’s health and physical well-being.” Emotional well-being is also a critical need.

Additionally, for many situations an every 90-day reauthorization is an administrative burden on the provider and DIDD system, as well as being an unnecessary hardship for the individual. The nature of many of the significant qualifying conditions, as outlined in the amendments often extend them beyond 90 days regularly.

The timeline for implementation is too aggressive. There are some significant changes that require new systems be in place. Additionally families and consumers need to be individually informed and have an opportunity to plan and adjust to the new services, requirements, and conditions - as they impact each waiver recipient. Implementation should be delayed to January 2019, at a minimum.

Thank you for sharing your questions, comments, and concerns.

The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. A person who considers themselves

retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their *entire* day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation.

The need for re-authorization of homebound services will be limited to specific population who qualifies for the homebound services and the re-authorization will put an appropriate focus on whether the needs of that individual have changed and if services need to also change. Authorizations for the Residential Special Needs Homebound Adjustment and the Non-Residential Homebound Support Service are to be reviewed and reauthorized, as appropriate, every 90 days. Homebound criteria includes support and medical care related to end of life, a sustained behavioral crisis, support needs related to hospital recovery, and chronic health issues that restricts the person from leaving their home. Detailed criteria are outlined in all three waivers under the service specifications for Non-Residential Homebound Support Services. These criteria also apply to the Residential Special Needs Homebound Adjustment.

Your comment concerning the word “Homebound” is appreciated and will be taken into consideration. To date, we have been unable to find a more acceptable term which captures the intent.

The provision of services starting out October 1, 2018 can be a smooth transition as an implementation protocol has been developed that will allow for services to be converted appropriately to the service plan for most persons supported. For most people, these changes will be seamless. Only a small number of people will need to work with their ISCs and Circles of Support to submit new plans and/or documentation regarding medical or behavioral needs.

Advocacy Organization	<ul style="list-style-type: none">• All Pages: Please provide your comments on the new Employment Services definitions and rates.• Please provide your comments on the new Day Services definitions and rates.• Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility.

Disability Rights Tennessee (DRT) is very thankful for the opportunity to publically comment on these proposed amendments to the 1915(c) HCBS waivers. DRT commends TennCare for making these programs more flexible and person-centered for the individuals they serve.

At the same time, we would like to share some of our concerns. First and foremost, we are concerned with the individual cost caps that the changes to the programs implement. We are fearful that these individual cost caps will result in more Tennesseans in nursing homes or Intermediate Care Facilities using their proposed plans. Because of this fear, we request that this data be tracked and publically shared. The public deserves to know if changes to the DIDD waiver programs result in negative results, and if so, to what extent.

Secondly, DRT is concerned that some of the changes to payments to providers found throughout the waiver changes are overly bureaucratic and not geared solely to improvements for the individuals that the programs serve. DRT is fearful that some of the hoop-jumping and waiting for payment that providers will have to do if the proposed changes are implemented will completely disincentive providers from providing the crucial services that they provide. Fewer providers in the field would be a very negative outcome for the individuals with disabilities that DRT serves. DRT realizes that at least some of the payment changes are motivated by wanting to improve the programs for individuals with disabilities. However, DRT cautions TennCare to be mindful of potential unintended results of these well-intentioned changes. TennCare should listen carefully to the feedback it receives from providers and have safeguards in place so that it can readjust if changes it makes result in a decrease in providers serving the individuals who participate in these programs.

Again, thank you very much for the opportunity to publically comment. DRT hopes that our comments result in improvements to the proposed changes that will be beneficial for Tennesseans with disabilities. Sincerely, Nathan Walsh, Staff Attorney Disability Rights Tennessee

[Thank you for sharing your questions, comments, and concerns.](#)

[No changes are proposed with respect to cost limits as part of this proposed amendment.](#)

[Of note, however, the proposed amendment does specify that a person enrolled in this waiver will not be disenrolled if the sole reason the cost cap would be exceeded is the change in the reimbursement methodology proposed in this amendment. DIDD and TennCare do currently track individuals that are transitioned into other programs or settings for all reasons.](#)

[The outcome based services, Exploration and Discovery, are some of the most popular and utilized services in the Employment and Community First Choices Program. The current network includes over 80 providers who provide services to both individuals in the 1915\(c\) Waivers and the Employment and Community Choices Program. Over half of those are current providers of the new outcome based Exploration, Discovery Services, and Job Development Services. 86% of individuals who chose the Exploration Services that are choosing to pursue employment through the Discovery Services. The current service delivery for these pre-employment services will rely on this existing](#)

network of providers that has been providing this service with less than 5% delay in service initiation. Based on feedback from the provider network, the additional authorization of services, including the pre-employment services is desired and needed in business sustainability.

Advocacy Organization

Pages 119-121

Page 119-212 – RE: State Grievance/Complaint System: This section addresses resolution of enrollee complaints. The resolution of complaints should not be separate from or serve as a substitute for resolution of appeals filed by enrollees. The amendment must be clear that in all cases where an adverse action has been taken, TennCare and DIDD must conform with due process and, specifically, the requirements of 42 CFR Part 431, Subpart E in resolving any enrollee complaint.

Thank you for your comment. These amendments do not propose any changes to these sections of the waivers; complaints would never be substituted for appeals regarding adverse actions. TennCare and DIDD do conform with all due process requirements.

Family Member/Representative

All pages

My name is Melynda Gasser, I have a sister, Dana Gasser, who is under the SW waiver program. First I would like to address this 6 hour in the community thing. It appears the State is STILL indirectly going to be requiring my sister to be in the community for 6 hours. The longer she is in the community, the more compensation her Provider agency gets. So . . . yes the State is requiring Dana to be out in the community as many hours as the Provider agency can get away with so they are compensated to the fullest! Can't really blame them though only the State.

My second concern is that it appears the State is putting ALL Tennessee residents with developmental disabilities in ONE category. ie a cookie cutter mold. First I am all for as many developmentally disabled resident's to be out working and interacting with our quote "Normal" citizens. BUT at some point you all have to be realistic. I mean my sister can not work in a normal job setting. (Just a foot note: she did do well and had pride though when she was working the contract work through her Provider Agency until the STATE of Tennessee took it away.) So since Dana can not actually hold a job, the STATE says she needs to be out in the "Community" for as many hours as possible, hoping she will be out the 6 hours daily. She already has to do this on her days at the Provider Agency. So we started IN HOME days twice a week and now it appears you all are going to take that away and make her be out up to 6 hours on those days as well. Just a couple of comparisons since you do not seem to be getting this . . . first would you like to be out talking with brain surgeons all day long or maybe a "Sheldon" from Big Bang Theory versus interaction with your peers. Not my idea of a good day! The STATE of TN is assuming all developmentally disabled

resident's are all the same level and just saying that makes me laugh. If you think this, you really do need a new career and you are to competent to do your JOB.

So to summarize . . . I have a couple of concerns . First how exactly will this 1915c amendment to the SW waiver affect my sister? I mean it is kind of hard to read 170 pages which do not make much since. Second, will Dana still be able to be at home on her In Home days or will she have to be in the community most of the day on those days.

Bottom line I feel all of this is from the law suit that the Federal Govt issued on the State of TN a while back. It appears the State is over compensating for the things that the Federal Govt found and now my sister and others are paying for the State of TN's misconduct.

I have more concerns, but since I found out about this just recently that I had till today to respond, this is all I have for now.

Thank you for your time. Melynda Gasser 615-430-5536

Thank you for sharing this perspective. The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of persons supported. The proposed changes are designed to allow **greater flexibility** to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. A person who considers themselves retired but does not meet the definition of “homebound” would now be able to use the new Community Participation Supports service in combination with the Intermittent Employment and Community Integration Wraparound Support service if they so choose. This means the person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their entire day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation.

Tennessee, like all states, has an obligation to ensure that we are providing services in the most integrated setting appropriate and in accordance with the federal HCBS settings rule. TennCare and DIDD believe in the ability of the people we serve to participate in competitive, integrated employment, regardless of their disabilities. We believe that every person has gifts and abilities that are needed by businesses in our local communities and that working together, we can help each person find their own unique path that will allow them to work at a job they like and earn money that allows them to exercise greater freedom in other aspects of life.

Family Member/Representative	
<p>I just commented earlier. My name is Melynda Gasser. And I want to apologize for my wording on some of my earlier comments. The lack of time to comment and the fact that I addressed this about 2 years ago with the second in command at DIDD very much frustrates me.</p> <p>I have over 50 years experience with the developmentally disabled and a lot of what the state of TENNESSEE is doing and wanting to do just simply makes no sense. And my only roll is caregiver and conservator for my sister now that our mother has passed away. I AM very protective of her and her rights!</p> <p>Again I do apologize for any harsh language, but not for the points I addressed.</p> <p>Thank you again and have a great day. I look forward to talking in more detail later about these issues.</p> <p>Melynda Gasser 615-430-5536</p>	
<p>Thank you for your comment.</p>	
Family Member/Representative	<p>Please provide your comments on the new Day Services definitions and rates.</p> <p>Please provide your comments on the adjustment in the minimum number and frequency of services for participant access and eligibility</p>
<p>As usual with government forms, this publication is as clear as mud! My son has been in the waiver for approximately 20+ years! Initially he was in “workshop”, day center. He was never able to participate in working and his heart surgery in 2003 required him to restrict his activities. He had a PA and Home based services. He does go out on limited trips with her to local activities. He loves her and his schedule! He will soon be 51 and does not work nor does he want to work. It cannot be an all or nothing at all situation! One solution will not fit everyone! We have had sheltered workshops, supported employment and van therapy I.e. community integration! My son has thrived with his current care and I think his health will suffer if he is required to be shuttled around as in olden days!</p> <p>One policy will not fit all!</p> <p>Could you meet outside of DAVIDSON County to meet parents?</p>	
<p>Thank you for sharing this perspective. The most important thing to understand is that all services should be delivered in a person-centered way in accordance with the needs and preferences of</p>	

persons supported. The proposed changes are designed to allow *greater flexibility* to persons supported and to providers. They are also designed to ensure compliance with the federal HCBS Settings Rule—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability. We have continued to observe an increase in the use of In-Home Day Services, (rather than more integrated employment and day services) since their implementation. A person will have the choice to spend more limited periods in the community (two hours a day) and spend the majority of the day at home, while still allowing for billing of each service at the appropriate level. To be clear, a person can choose to spend their entire day at home; however, the Intermittent Employment and Community Participation Wraparound service would not be a billable service in that situation.

Tennessee, like all states, has an obligation to ensure that we are providing services in the most integrated setting appropriate and in accordance with the federal HCBS settings rule. TennCare and DIDD believe in the ability of the people we serve to participate in competitive, integrated employment, regardless of their disabilities. We believe that every person has gifts and abilities that are needed by businesses in our local communities and that working together, we can help each person find their own unique path that will allow them to work at a job they like and earn money that allows them to exercise greater freedom in other aspects of life.

Advocacy Organization

Pages 39-42

Re: section B-2, the individual cost limit and forced disenrollment raises concerns for individuals who need extensive services in order to safely remain in their home. If these provisions result in individuals being forced to submit to institutionalization in an intermediate care facility for individuals with intellectual disabilities (ICF/IID) in order to receive the same services that could be safely provided in an integrated setting (without regard to the cost limit), then imposing such arbitrary limits without considering the needs of the individual would be a violation of federal law, specifically, *Olmstead v. L.C. ex rel. Zimring*, 527 U.S. 581, 603 (1999) (holding the failure of a state agency to place an individual with disabilities in a community-based setting when it is medically appropriate and the individual so desires is a violation of Title II of the ADA, unless the state can prove that providing the reasonable modifications necessary to serve that individual in a community-based setting would require a fundamental alteration of the state’s programs.) If the state would reimburse 100% of the cost of all needed services in a segregated setting like an ICF/IID but would refuse to cover the same level of care at home because it would exceed the \$30,000 (or \$36,000) cap, then many individuals would be forced into institutions in order to have their needs met and the goal of integration and inclusion of persons with ID/DD would not be met.

Thank you for sharing your questions, comments, and concerns.

No changes are proposed with respect to cost limits as part of this proposed amendment.

Of note, however, the proposed amendment does specify that a person enrolled in this waiver will not be disenrolled if the sole reason the cost cap would be exceeded is the change in the reimbursement methodology proposed in this amendment. DIDD and TennCare do currently track individuals that are transitioned into other programs or settings for all reasons.

Note also that the proposed changes are designed to ensure compliance with the federal HCBS Settings Rule and with the ADA and Olmstead—to ensure that persons supported have every opportunity to fully participate in community life, and not to be isolated or “institutionalized” in their own homes, regardless of the person’s age or disability.

HCBS Provider

Don't start this until Jan. 2019. If it rolls out too soon we will not be prepared as providers.

TennCare and DIDD have been discussing these changes with providers for some time. The provision of services starting out October 1, 2018 can be a smooth transition as an implementation protocol has been developed that will allow for services to be converted appropriately to the service plan for most persons supported.

HCBS Provider

Please provide your comments on the new Employment Services definitions and rates.

It appears those agencies that have been successful in employment practices will lose money. That is not right.

1. By changing Employment - Individual from a daily rate to a 1/4 hour rate you reduce funding, if a person only works a short period during the day. When combining the Community and Employment - Indiv 1/4 hour rates the daily amount is substantially less than the previous daily rate paid for employment. The cost of developing and maintaining employment for an individual is greater than the cost of providing community services regardless of the amount of time a person is employed.
2. For agencies that have already placed a lot of individuals into employment, without the aid of paid exploration and discovery, there will be no funding in these two services. It seems unfair to those agencies who have been aggressive in finding jobs for those they support.
3. Since employment is the State's goal and philosophy, and what is best for the person, agencies should be rewarded with ongoing funding for successful employment placements without funding being tied to face to face, writing reports and telephone contacts. Constant, substantial ongoing funding should continue as long as the person is working, with agencies concentrating on identifying ways to maintain, locate and upgrade employment. To quote the State "align incentives toward

competitive integrated employment and community participation. It's easy to measure whether a person is employed successfully by interviewing the person and the employer. If an agency is successful placing individuals on jobs, then pay the agency accordingly. Think outside the box. What is really performance measures?

In your review make sure successful job placement agencies are not affected negatively.

Thank you for sharing these concerns

It is important to understand that **rates of reimbursement for employment services will be *increased*** as part of these changes. Reimbursement rates have been increased for Supported Employment-Individual Job Coaching to ensure providers are fairly compensated for the cost of providing service in a high quality way. New proposed reimbursement rates for Supportive Employment Individual Job Coaching range from \$20 to \$26 an hour. New services have been added (i.e., Exploration, Discovery, and Job Development) that will compensate providers for supports designed to assist people in learning and successfully engaging in services that can help them to be both more physically and financially independent. There is a new Quality incentive payment up to \$4,000 a year for supported employment providers supporting individuals working in competitive integrated employment at least 15 hours per week. The new Intermittent Employment & Community Wraparound service will allow providers to bill for services that are not currently billable. **There would be no reduction to current funding levels for employment and day services as a whole.** The flexible mix of services that can be provided in any given day gives providers more flexibility and ability to get paid for actual services delivered.

The newly proposed Employment and Day services have been created to support people in becoming more integrated in the community and assist them further with obtaining competitive integrated employment. Further integration in the community and obtaining and maintaining competitive integrated employment have been proven through years of research to be extremely beneficial in improving quality of life.

TennCare and DIDD believe these changes will not only truly help improve a person's quality of life but will also be beneficial to the provider community. The proposed changes to the new Employment and Day services are targeted to create more flexibility for people receiving the services and to providers delivering the services. Waiver participants will now be able to use their home as their base from which to access community and employment opportunities.

Also, there will no longer be an expectation that a person receives a full six hours of Employment and Day Services on a particular day in order for the provider to bill for services the person receives.

Separate and apart from these changes, please note that *significant* new funding was approved by the General Assembly to support wage increases for direct support professionals providing these and other waiver services beginning July 1, 2018. See <http://tndidd.tumblr.com/post/173360020625/2018-appropriations-act-state-services-budget-fy>.

